

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th St. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2010 OCT 18 PM 2:29

COMMITTEE NAME (Must be same as on Statement of Organization) <u>Committee to Elect Kamm for Supervisor</u>	
IMPORTANT: Indicate by # type of committee you are reporting for: <u>5</u> (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue	
CANDIDATE COMMITTEES ONLY: Candidate Name <u>Douglas Kamm</u>	Political Party (if applicable) <u>Republican</u>
Office Sought <u>Supervisor</u>	District (if Senate or House)

FORM DR-2 (Rev. 12/2009)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	
Logged in	
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Douglas Kamm
SIGNATURE OF PERSON FILING REPORT

641-228-7965
TELEPHONE

10/14/10
DATE SIGNED

I AM FILING A October 19, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1,107.25

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,550.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 2,657.25

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2,072.45

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 584.80

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 75.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Kamm for Supervisor

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
✓ 7/20/10	ID# CK# 2824	Don McIntroy D+L Carcare 501 N. Main St. Charles City, IA 50616		\$25.00	<input type="checkbox"/>
✓ 7/20/10	ID# CK# 2535	Kurt Herbrechtsmeyer 2939 Wedgewood Estates Pl. Charles City IA 50616		\$25.00	<input type="checkbox"/>
✓ 7/20/10	ID# CK# 7175	Ron Litterer 2931 Shadow Ave. Greene IA 50636		\$50.00	<input type="checkbox"/>
✓ 8/4/10	ID# CK# 720	Maurice Johnson 1140 HWY 218 Floyd IA 50435		\$25.00	<input type="checkbox"/>
✓ 8/4/10	ID# CK# 1746	George Cummins 2110 Underwood Ave Charles City IA 50616		\$20.00	<input type="checkbox"/>
✓ 8/16/10	ID# CK# 485	Cip & Judy Hauser 204 Glenwood Rd Charles City IA 50616		\$25.00	<input type="checkbox"/>
✓ 8/16/10	ID# CK# 3036	Steve Shankland 708 Kelly Street Charles City IA 50616		\$50.00	<input type="checkbox"/>
✓ 8/24/10	ID# CK# 2984	Brad Hemsath 905 Ellis Dr. Charles City IA 50616		\$20.00	<input type="checkbox"/>
✓ 8/26/10	ID# CK#	Leroy Michael 1946 HWY 147 Rockford, IA 50468		\$5.00 cash	<input type="checkbox"/>
✓ 8/26/10	ID# CK# 6250	Dale Sims 521 Sunset Pl Charles City		\$25.00	<input type="checkbox"/>
SUB-TOTAL				\$270.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Elect Kamm for Supervisor

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(5), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
X 8/30/10	ID# CK# 1533	Mike Moistad 2974 Wedgewood Estates Charles City IA 50616		\$ 50.00	<input type="checkbox"/>
X 8/30/10	ID# CK# 6229	City Motor Parts 610 S. Main St. Charles City IA 50616		\$ 100.00	<input type="checkbox"/>
X 8/30/10	ID# CK# 2214	Phil McIntire 2464 195th Street Charles City IA 50616		\$ 50.00	<input type="checkbox"/>
X 8/31/10	ID# CK# 5012	David Jeffrey 1780 Oak Drive Charles City IA 50616		\$ 50.00	<input type="checkbox"/>
X 9/7/10	ID# CK# CASH	Larry Stewart 1208 Ellis Drive Charles City IA 50616		\$ 200.00 CASH	<input type="checkbox"/>
X 9/8/10	ID# CK# 4027	Sean Tjaden 1744 Underwood Ave Charles City, IA 50616		25.00	<input type="checkbox"/>
X 9/8/10	ID# CK# 5764	Loren Recker 606 W. Johnson St Charles City, IA 50616		25.00	<input type="checkbox"/>
X 9/8/10	ID# CK# 2249	George Mitchell 2279 Quince Ave Charles City, IA 50616		25.00	<input type="checkbox"/>
X 9/8/10	ID# CK# 10099	Pete Menfeld 2231 26th St SW Mason City, IA 50616		100.00	<input type="checkbox"/>
X 9/10/10	ID# CK# 3799	Ron McGregor 3384 24th St. Nashua IA 50658		\$ 25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 650.00	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Kamm for Supervisor

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/14/10	ID# CK# 9155	Mr + Mrs. Lyle Schilder 601 Freeman St. Charles City, Iowa 50616	—	\$ 100.00	<input type="checkbox"/>
9/14/10	ID# CK# 9548	Mr. + Mrs. Dennis Brinkman 2404 270th St. Greene, Iowa 50636	—	150.00	<input type="checkbox"/>
9/24/10	ID# CK# 582	Dennis Carney 3091 Greene, RA Greene, Iowa	—	50.00	<input type="checkbox"/>
10/12/10	ID# CK# 1545	Thomas Keiser 510 Freeman Street Charles City, IA 50616	—	\$ 100.00	<input type="checkbox"/>
10/12/10	ID# CK# 9702	Alan Powell 3001 Yorkshire Charles City, IA 50616	—	\$ 100.00	<input type="checkbox"/>
10/13/10	ID# CK#	Steve Culbertson PO Box 1826 Barrow, AK 99723		\$ 100.00	<input type="checkbox"/>
10/13/10	ID# CK#	Helen Hart 115 Central Ave. Charles City, IA		\$ 30.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 630.00	
TOTAL (If last page of this schedule)				\$ 1550.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect KAMM for Supervisor

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/15/10	ID# CK# 1009	Jackson Street Press 708 N. Jackson St. Charles City IA 50416	Flyer Printing	\$242.41
7/30/10	ID# CK# 1010	Postmaster 2 Rolls of Stamps	Send Campaign Letters	88.00
7/30/10	ID# CK# 1011	Target Visa/Bash Signs ordered online	for Yard Signs and Parade Car Doors	636.69
8/11/10	ID# CK# 1012	Sherwin Williams 210 N. Main, Charles City	for paint supplies for signage	\$48.62
8/30/10	ID# CK# 1013	Target Visa/ Magnetic Business Card for ordered online mailings - 2 to handout		317.18
9/1/10	ID# CK# 1014	Cedar Valley Printing Letter/Stationery	Campaign Letters.	23.05
9/10/10	ID# CK# 1015	Target Visa/ Candy Direct - 88.80 Votes Unlimited - Foil Kamm Stickers - 133.50	ordered online	222.30
9/24/10	ID# CK# 1016	JA Kamm Reimburse Startup Campaign checking		400.00
SUB-TOTAL				\$1978.45
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

BANK PAGE

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect KAMM for Supervisor

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/24/10	ID# 1017 CK# 1017	Charles City Press	Vote Kamm Supervisor Newspaper Ad	\$ 50.00
10/1/10	ID# CK# 1018	Postmaster	Stamps for Thankyou letters	44.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 94.00
TOTAL (If last page of this schedule)				\$ 2072.45

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Kamm for Supervisor

SCHEDULE

E

(Rev. 08/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7/15/10	Jackson Street Press 708 N. Jackson Street Charles City, IA 50616		Contribution off printing fees	\$ 50 ⁰⁰	<input type="checkbox"/>
10/11/10	Warren Dunkel 2129 Pin Oak Estates Charles City, IA 50616		Candidate Open House	\$ 25 ⁰⁰	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 75⁰⁰TOTAL (If last
page of this
schedule)\$ 75⁰⁰

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)